MANUALLY EXCLOS

Serial

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR**

OMB APP	ROVAL							
OMB Number:	3235-0076							
Expires:	May 31, 2002							
Estimated average burden								
hours per respo	nse 16.00							

SEC USE ONLY

Prefix

	UNIFORM LIMITED OFFERING EX	EMPTION DATE RECEIVED
Name of Offering (☐ check	if this is an amendment and name has changed, and in	ndicate change.)
Reink Corp. Secured Convertible	Promissory Notes	
Filing Under (Check box(es) th	at apply): Rule 504 Rule 505 Rule 506	☐ Section 4(6) ☑ ULOE
Type of Filing: New Filing	ng 🗆 Amendment	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information reques	ted about the issuer	
•	this is an amendment and name has changed, and indicate	cate change.)
Reink Corp.		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·
2550 Haddonfield Road, Pennasuaker	ı, N.J. 08110	(856) 488-9599
Address of Principal Business (if different from Executive Of	Operations (Number and Street, City, State, Zip Code) fices)	Telephone Number (Including Area Code)
Brief Description of Business Manufacture and mareting of ink	jet and laser printer consumables.	02059705
Type of Business Organization		
□ corporation □	☐ limited partnership, already formed	☐ other (please specify):
☐ business trust	☐ limited partnership, to be formed	
Actual or Estimated Date of I	Month Year ncorporation or Organization: Month Year 0 6 9 5	No Actual ☐ Estimated PROCES

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

•		•			
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner		□ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Gallagher, William E.					
Business or Residence Addres	s (Number a	nd Street, City, State, 2	Zip Code)		
2550 Haddonfield Road, Pennas	suaken, N.J. 0811	10			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Smith, William M.					
Business or Residence Addres	s (Number a	nd Street, City, State, 2	Zip Code)	<u> </u>	
2550 Haddonfield Road, Pennas	suaken, N.J. 0811	10			
	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Sinatra, Robert					
Business or Residence Addres	s (Number a	nd Street, City, State, 2	Zip Code)		
2550 Haddonfield Road, Pennas	suaken, N.J. 0811	10			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Zolg, Robert Business or Residence Address	Number a	nd Street, City, State, 2	Zip Code)		
Charles Pay(as) that Apply			Officer	Ø D'	☐ General and/or
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	Managing Partner
Full Name (Last name first, i	f individual)				
Maddaver, Wayne J.					
Business or Residence Addres	s (Number a	nd Street, City, State, 2	Zip Code)		
2550 Haddonfield Road, Pennas	suaken, N.J. 0811	10			
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Pallante, Anthony M.					
Business or Residence Addres	(Number as	nd Street, City, State, 2	Cip Code)		
c/o Manchester Consolidated Co	orp., 120 Adelaid	e Street West - suite 2401	, Toronto M5H 1T1, Cana	da	
	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Irvine, Thomas J.					
Business or Residence Addres	s (Number a	nd Street, City, State, 2	Zip Code)		
c/o 4C Holdings, Inc. 21760 Fro	ontenoc Court. Bo	oca Raton, Florida 33433			
			onal copies of this sheet	as necessary)	

) Carmina		Physical Co.		B. I.	NFORM.	ATION A	BOUT O	FFERIN	G	August 1		<u> </u>	de la Mille
1. Has	the issuer	sold, or do	ئے es the issu	er intend t	o sell, to r	non-accred	lited inves	tors in this	offering?		,	Yes □	No ⊠
			Ans	wer also i	n Append	ix, Columi	n 2, if filir	ng under U	LOE.				
2. Wha	t is the mir	nimum inv	estment the	at will be	accepted fi	om any in	dividual?		· · · · · · · · ·		\$	25,000.0	00
3. Does	the offeri	ng permit j	joint owne:	rship of a s	single unit	?						Yes ⊠	No
sion to be list the	the inform or similar relisted is a he name of ealer, you	emuneration associated the broke	on for solic ed person o er or dealer	itation of por or agent of . If more t	ourchasers a broker o han five (in connect or dealer re 5) persons	ion with sa egistered v to be liste	les of secu with the SE d are asso	rities in the C and/or v	e offering. with a state	If a person or states,		
Full Name	(Last nam	ne first, if	individual)									
The Thorn	water Comp	any, L.P.											
Business of	r Residenc	ce Address	(Number	and Street	, City, Sta	te, Zip Co	de)				-		
99 Wall Str	reet - 11th I	Floor, New	York, NY	10005									
Name of A									· ····································				
States in V	Which Pers	on Listed	Has Solici	ted or Inte	nds to Sol	icit Purch	asers						
(Check	"All States	" or check	individual	States)								□ All S	States
[AL]	[AK]	[AZ]	[AR]	(CA)	[CO]	(CT)	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]
	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO	-
[MT]	[NE]	[NV]	[NH]	NJ	[NM]	(NY)	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
_ [RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last nam	ne first, if	individual))									
Business of	r Residenc	e Address	(Number	and Street	, City, Sta	te, Zip Co	de)						
Name of A		D=-(Dayler							. 110			
Name of A	issociated	Broker or	Dealer										
States in V		on Listed	———— Has Solici	ted or Inte	nds to Sol	icit Purch	asers						
(Check !	'All States	" or check	individual	States)							ı		States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	 [ні]	[ID	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[wi]	[WY]	[PR	
Full Name					····					· ``			
										····			
Business o	or Residenc	e Address	(Number	and Street	, City, Sta	te, Zip Co	de)						
Name of A	ssociated	Broker or	Dealer										
Name of A	issociated	DIOKCI OI	Dealei										
States in V	Vhich Pers	on Listed	Has Solici	ted or Inte	nds to Sol	icit Purcha	asers						
	'All States'					•						□ All S	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	·	Aggregat		Am	ount Already
	Type of Security	fering Pr		_	Sold
	Debt				
	Equity	\$ 		\$	
	☐ Common ☐ Preferred	2 000 00	0.00		50 000 00
	Convertible Securities (including warrants)				
	Partnership Interests	\$ 		\$	
	Other (Specify)				
	Total	\$ 2,000,00	0.00	\$	50,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors		Do	Aggregate llar Amount Purchases
	Accredited Investors.	 	1	\$	50,000.00
	Non-accredited Investors	 	0	\$	0.00
	Total (for filings under Rule 504 only)	 		\$	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	-		- 4	
	Type of offering	Type of Security		Doll	ar Amount Sold
	Rule 505	 	NA	\$	
	Regulation A	 		\$	
	Rule 504	 		\$	
	Total				
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees	 		\$	
	Printing and Engraving Costs	 		\$	
	Legal Fees	 	×	\$	50,000.00
	Accounting Fees			\$	
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)		⊠	\$	200,000.00
	Other Expenses (identify) Selling Agent's Expense Allownace		\boxtimes	\$	40,000.00
	Total			\$	200.000.00
	10(a)	 	_	Ψ	-,-,-,-,-

C. OFFERING PRICE, NUMBER	R OF INVESTORS, EXPENSES AND	USE C	F PROCEEDS	para di series El person	
b. Enter the difference etween the aggregate offer tion 1 and total expenses furnished in response to 1 "adjusted gross proceeds to the issuer."	Part C - Ouestion 4.a. This difference	is the		\$_	1,710,000.00
5. Indicate below the amount of the adjusted gross prused for each of the purposes shown. If the amount estimate and check the box to the left of the estimate the adjusted gross proceeds to the issuer set forth it.	nt for any purpose is not known, furn the total of the payments listed must	ish an Leoual			
the adjusted gross proceeds to the issuer set total is	n response to Part C - Question 4.0 a	.oove.	Payments to Officers, Directors, & Affiliates	1	Payments To Others
Salaries and fees		□ \$.		□ \$_	
Purchase of real estate		□ \$.		. □ \$ _	
Purchase, rental or leasing and installation of m	achinery and equipment	□ \$. □ \$_	
Construction or leasing of plant buildings and fac	cilities	□ \$. 🗆 💲 _	
Acquisition of other businesses (including the voffering that may be used in exchange for the a issuer pursuant to a merger)	ssets or securities of another	□ \$.		. 🗆 s _	
Repayment of indebtedness		□ \$.	· · · · · · · · · · · · · · · · · · ·	⊠ \$_	350,000.00
Working capital		□ \$.		. 20 S_	1,360,000.00
Other (specify):		□ \$.		□ \$_	-
		□ s .		□ \$_	
Column Totals		□ s.		□ \$_	1,710,000.00
Total Payments Listed (column totals added)			□ \$	1,710,00	0.00
	D. FEDERAL SIGNATURE	e distribution			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
The issuer has duly caused this notice to be signed by following signature constitutes an undertaking by the isquest of its staff, the information furnished by the issuer.	the undersigned duly authorized perso suer to furnish to the U.S. Securities a er to any non-accredited investor purs	n. If thi nd Excl suant to	s notice is filed hange Commiss paragraph (b)	d under l sion, upo (2) of R	Rule 505, the on written re- ule 502.
Issuer (Print or Type)	Signature		Date		
Reink Corp.	TANK		Septer	nber ¹⁷ , 2	002
Name of Signer (Print or Type)	Title of Signer (Print or Type)	2			
William M. Smith	Executive Vice President				

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)